

 $1301\ 12^{\text{TH}}\ \text{STREET}$  SUITE 104 ALTOONA, PA 16601

PHONE (814) 949-2456 FAX (814) 949-2411

## **DEPARTMENT OF CODES & INSPECTIONS**

## CITY OF ALTOONA NEW BUSINESS/MERCANTILE LICENSE APPLICATION

LICENSE FEE: \$50.00	
TYPE OF BUSINESS:	
BUSINESS NAME:	
BUSINESS ADDRESS:	
BUSINESS PHONE:	BUSINESS FAX
FEDERAL I.D. #	_STATE I.D. #
PLEASE CHECK ONE:	
<ul> <li>□ CORPORATION</li> <li>□ PARTNERSHIP</li> <li>□ SOLE PROPRIETORSHIP</li> <li>□ SUB CHAPTER S CORP</li> <li>□ UNKNOWN</li> </ul>	
OWNER NAME(S):	
OWNER ADDRESS(ES):	
OWNER PHONE(S):	
MAILING ADDRESS FOR BILLING AND TAX INFORMATION:	
CONTACT PERSON:	
I hereby certify that all the information and statements herein are true and correct.	
Signature of Applicant	Date
OFFICE USE ONLY	
□ APPROVED □ DENIED	
COMMENTS:	
Signature of Officer	 Date

CC: Altoona Area School District Tax Office